

DEPARTMENT OF HEALTH AND HUMAN SERVICES  
CENTERS FOR MEDICARE & MEDICAID SERVICES

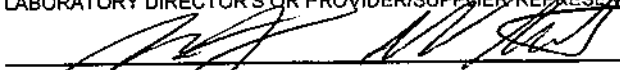
PRINTED: 02/10/2010  
FORM APPROVED  
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  445112	(X2) MULTIPLE CONSTRUCTION A. BUILDING 01 - MAIN BUILDING 01 B. WING _____		(X3) DATE SURVEY COMPLETED  02/08/2010
NAME OF PROVIDER OR SUPPLIER  TREVECCA HEALTH CARE CENTER			STREET ADDRESS, CITY, STATE, ZIP CODE 329 MURFREESBORO RD NASHVILLE, TN 37210		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETION DATE	
K 050 SS=F	<p><b>NFPA 101 LIFE SAFETY CODE STANDARD</b></p> <p>Fire drills are held at unexpected times under varying conditions, at least quarterly on each shift. The staff is familiar with procedures and is aware that drills are part of established routine. Responsibility for planning and conducting drills is assigned only to competent persons who are qualified to exercise leadership. Where drills are conducted between 9 PM and 6 AM a coded announcement may be used instead of audible alarms. 19.7.1.2</p> <p>This STANDARD is not met as evidenced by: Based on record review it was determined the facility failed to conduct the required fire drills.</p> <p>The findings include:</p> <p>Records review on 12/11/09, at 12:25 p.m. revealed no fire drills were conducted during the second shift first quarter, third shift first quarter and second shift second quarter of 2009. National Fire Protection Association (NFPA) 101, 7.2.1.5.1</p> <p>This finding was acknowledged by the Administrator and verified by the Maintenance Supervisor at the exit interview on 2/8/10</p>	K 050	<p>First Quarter 2010 fire drills completed for all three shifts: 7-3 Shift 2-8-10 3-11 Shift: 2-16-10 11-7 Shift: 2-17-10 (See Attachment #1)</p> <p>Timing of quarterly fire drills revised by the Maintenance Director: 7-3 Shift: First Month of Quarter 3-11 Shift: Second Month of Quarter 11-7 Shift: Third Month of Quarter</p> <p>Maintenance Director will report dates and times of completed fire drills to the Administrator and the Quality Improvement Committee on a quarterly basis.</p>	Completion Date: March 27, 2010	
K 052 SS=F	<p><b>NFPA 101 LIFE SAFETY CODE STANDARD</b></p> <p>A fire alarm system required for life safety is installed, tested, and maintained in accordance with NFPA 70 National Electrical Code and NFPA 72. The system has an approved maintenance and testing program complying with applicable requirements of NFPA 70 and 72. 9.6.1.4</p>	K 052	<p>Under contract with Allied Sound, Inc. New Fire-Lite Annunciator panel to be installed at front desk to have audible and visual signals. (See Attachment #2)</p>		

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

 ADMINISTRATOR 2-25-10

Any deficiency statement ending with an asterisk (\*) denotes a deficiency which the institution may be excused from correcting providing it is determined that other safeguards provide sufficient protection to the patients. (See instructions.) Except for nursing homes, the findings stated above are disclosable 90 days following the date of survey whether or not a plan of correction is provided. For nursing homes, the above findings and plans of correction are disclosable 14 days following the date these documents are made available to the facility. If deficiencies are cited, an approved plan of correction is requisite to continued program participation.

FEB 26 2010

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K 052	Continued From page 1  This STANDARD is not met as evidenced by: Based on observation, testing and record review, it was determined the facility failed to maintain the fire alarm system.  The findings included:  1. Observations and testing of the main fire alarm panel on 2/8/10, at approximately 11:40 a.m. revealed that when phone lines #1 or #2 were disconnect from the panel, there were no audible or visual signals at the 1st floor fire alarm's annunciator panel. National Fire Protection Association (NFPA) 72, 3-8.1  2. Records review on 2/8/10, at 12:10 p.m. revealed the facility was unable to provide documentation that the smoke detector's sensitivity test were conducted every 2 years. NFPA 72, 7-3.5.1  These findings were acknowledged by the Administrator and verified by the Maintenance Supervisor at the exit interview on 2/8/10. NFPA 101 LIFE SAFETY CODE STANDARD	K 052	Under contract with Allied Sound Inc. for installation of new Fire Alarm System and Sensitivity Testing of New Smoke Detectors. (See Attachment #3)  Education will be provided to Maintenance Staff and Front Desk Staff upon installation.  Maintenance/Contractor will conduct a quarterly test of the system.  Checklist of required testing for the fire alarm system developed by the Maintenance Director.  A report of testing results will be compiled by the Maintenance Director. The report will be presented to the Quality Improvement Committee and the Administrator on a quarterly basis.		
K 062 SS=F	Required automatic sprinkler systems are continuously maintained in reliable operating condition and are inspected and tested periodically. 19.7.6, 4.6.12, NFPA 13, NFPA 25, 9.7.5	K 062	K062: See Next Page	Completion Date: March 27, 2010	

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K 062	Continued From page 2  This STANDARD is not met as evidenced by: Based on observations it was determined the facility failed to maintain the sprinkler system.  The findings include:  1. Observations on 2/8/10, at 9:57 a.m. revealed the 3rd and 4th floor shower rooms 1 and 2 had corroded sprinklers. Sprinklers must be replaced not cleaned. National Fire Protection Association (NFPA) 25, 2-2.1.1  2. Observation of the 3rd floor's linen room on 2/8/10, at 10:16 a.m. revealed the sprinkler's deflector was damaged. NFPA 25, 2-2.1.1  3. Observation on 2/8/10, at 11:07 a.m. revealed the kitchen's refrigerator sprinkler was dirty. NFPA 25, 2-2.1.1  4. Records review on 2/8/10, at 12:20 a.m. revealed the facility was unable to provide documentation that the sprinkler system's gages were tested or replaced every 5 years. NFPA 25, 2-2.1  These findings were acknowledged by the Administrator and verified by the Maintenance Supervisor at the exit interview on 2/8/10. NFPA 101 LIFE SAFETY CODE STANDARD	K 062	Contracted with Superior Fire Protection, Inc. to replace sprinkler heads in 3 <sup>rd</sup> and 4 <sup>th</sup> shower rooms and kitchen's refrigerator, replace sprinkler deflector in the 3 <sup>rd</sup> floor linen room and replace the sprinkler system water gauges. (See Attachment #4).  Remaining sprinkler heads and deflectors checked throughout the building with no other corrosion, dirt or damaged deflectors identified.  Maintenance Department will check sprinkler heads and deflectors throughout the building on a quarterly basis for damage or corrosion.  Monitoring results will be reported to the Quality Improvement Committee on a quarterly basis.		Completion Date: March 27, 2010
K 144 SS=F	Generators are inspected weekly and exercised under load for 30 minutes per month in accordance with NFPA 99. 3.4.4.1.	K 144	K144: See Next Page		

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